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CONFIRMATION NO. 5149

Bib Data Sheet

SERIAL NUMBER 09/986,376	FILING DATE 11/08/2001 RULE	CLASS 606	GROUP ART UNIT 3731	ATTORNEY DOCKET NO. 00167-432001
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APPLICANTS

Dennis Colleran, North Attleborough, MA;
 Stefan Gabriel, Mattapoisett, MA;

** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 11/26/2001

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY MA	SHEETS DRAWING 12	TOTAL CLAIMS 24	INDEPENDENT CLAIMS 4
Verified and Acknowledged			Examiner's Signature 	Initials 			

ADDRESS

JOEL R. PETROW
 Smith & Nephew, Inc.
 1450 Brooks Road
 Memphis , TN 38116

TITLE

Tissue repair system

FILING FEE RECEIVED 896	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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